1	PATERIT ADDI ICATION CEC DESCRIPTION								Application or Docket Number				
	PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003						OR	10/8/0.089					
	CLAIMS AS FILED - PART (Column 2)						SMALI	ENTITY		OTH	ER THAN L ENTITY		
	TOTAL CLAII	vis 4	oL			•		RATI	E FEI	_	RATE		
$\cdot \ $	FOR .	•	NUME	SER FILED	NUN	48ER EXTRA	1	BASIC I	EE 385.	, C	BASIC FE		
	TOTAL CHARG	BEABLE CLAIMS	40	40 minus 20= 1		0	1.	XS 9:			300.0	-	
	NDEPENDENT	CLAIMS	9	minus 3 =	. 6	;		X43=					
F	AULTIPLE DEPENDENT CLAIM PRESENT									┦⁰	7 200	516	
1.	* If the difference in column 1 is less than zero, enter "0" in column 2								<u>' </u>	OF	+290=		
									<u>ا</u> ا	JOF	R TOTAL	1.646	
<u> </u> _	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	OR		R THAN ENTITY	
AMENDMENTA		CLAIMS REMAINING AFTER AMENOMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONA FEE		RATE	ADDI- TIONAL FEE	
	Total	. 40	Minus	- 4	-0	•	t I	X\$ 9=		OR	X\$18=		
	Independent		Minus	***	9	1	П	X43=		OR	X86=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	1.145-	1	1 '''		1	
1,17,21,22,23,24,25,34,40+145= OR +290=													
		(Column 1)		(Column		240 (Column 3)	- A	DDIT. FEE	<u> </u>	OR	ADDIT. FEE	<u> </u>	
MT 8		CLAIMS REMAINING AFTER		HIGHE! NUMBE PREVIOU	ST R	PRESENT EXTRA	I	RATE	ADDI- TIONAL	1	RATE	ADDI- TIONAL	
AMENDMENT	Total	• U()	Minus	PAID FO)R		-	XS 9= '	FEE	1_	X\$18=	FEE	
MEN	Independent	. 9	Minus	1	•		·		· ·	OR	X\$185	·	
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X43= .		OR	X86=	·	
										OR	+290=		
										OR ,	TOTAL LODIT, FEE		
		(Column 1)		(Column		(Column 3)	· ·	•	· .				
AMENDMENTC	•	REMAINING AFTER AMENDMENT		NUMBER PREVIOUS PAID FOI	LY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Total	•	Minus	-		•.	1,	(\$ 9=			X\$18=	FEE_	
	Independent	•	Minus	•••	一	-	\vdash			OR	-		
7	FIRST PRESE	F,	(43=		OR	X86=							
• #	the entry in colur	nn 1 is less than the	entry in colu	mo 2, write "O"	in cotu	mn 3. ·	Ŀ	145= TOTAL		OR	+290=		
	the "Highest Nur the "Highest Nur	nber Previously Pai mber Previously Paid ber Previously Paid	d For IN THE	S SPACE IS NO.	s than	20. enter "20."		IT. FEE L			TOTAL DOTT. FEE L		
-				•						• • •			